# STUDENT INTERN ASSESSMENT FORM

# TO BE COMPLETED BY SUPERVISOR

## STUDENT

Surname:

First name :

## SUPERVISOR

Surname:

First name :

Company :

## Satisfaction

On a scale of 1 to 10, 1 being the lowest grade and 10 the highest, how would you rate your satisfaction in the following areas:

|  |  |
| --- | --- |
| **Criteria** | **Grade** |
| Presentation |  |
| Politeness |  |
| Attendance record |  |
| Punctuality |  |
| Ability to follow instructions |  |
| Ability to stay focused |  |
| Interest in the organisation |  |
| Sense of observation |  |
| Team spirit |  |
| Ability to work independently |  |
| Overal impression |  |

Comments :

Date : Signature :